



Filing ID #10025366

FINANCIAL DISCLOSURE REPORT

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FILER INFORMATION

Name: Hon. Max Rose
Status: Congressional Candidate
State/District: NY11

FILING INFORMATION

Filing Type: Amendment Report
Filing Year: 2018
Filing Date: 03/19/2019

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Bank Account - TD Bank [BA]	SP	\$250,001 - \$500,000	Interest	\$201 - \$1,000	\$201 - \$1,000
Bank Account - USAA Checking Account [BA]	JT	\$15,001 - \$50,000	Wedding Gifts	\$1 - \$200	None
Fidelity Roth IRA - Fidelity Zero Total Market Index [IH]	SP	\$15,001 - \$50,000	Interest	\$201 - \$1,000	\$201 - \$1,000
ISHARES CORE S&P MID CAP ETF [EF]		\$15,001 - \$50,000	Interest	\$201 - \$1,000	None
ISHARES CORE S&P SM CAP ETF [EF]		\$1,001 - \$15,000	Interest	\$201 - \$1,000	None
ISHARES INC CORE MSCI ETF [EF]		\$1,001 - \$15,000	Interest	\$201 - \$1,000	None
Rental Property [RP]	SP	\$500,001 - \$1,000,000	Rent	\$15,001 - \$50,000	\$5,001 - \$15,000
LOCATION: Hoboken, NJ, US					
Self-Employed, 100% Interest [OL]	SP	None	Self-Employed	Not Applicable	Not Applicable
LOCATION: Staten Island, NY, US					

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
DESCRIPTION: Freelance fashion consultant					

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Brightpoint Health	Salary and Bonus.	\$5,000.00	\$142,070.00
National Guard	Salary	\$3,668.90	\$13,954.00
Freelance Work	Spouse	N/A	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
SP	Chase	November 2014	Mortgage	\$250,001 - \$500,000

SCHEDULE E: POSITIONS

Position	Name of Organization
Chief Of Staff	Brightpoint Health
Captain	Army National Guard

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
October 2017	Brightpoint Health	Strategy consultant services rendered

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

Yes No

CERTIFICATION AND SIGNATURE

I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Hon. Max Rose , 03/19/2019